

**Health Professions Council
Approvals Panel – 13 June 2006**

VISITORS' REPORTS

Executive Summary and Recommendations

Introduction

The attached Visitors' reports for the following programmes have been sent to the education providers and following a 28 day period no representations have been received. The education providers are in the process of meeting the conditions recommended by the HPC Visitors.

Education Provider	Programme Name	Delivery mode
University of Coventry	Diploma HE ODP	FT
University of Huddersfield	Supplementary Prescribing for Allied Health Professionals	PT
University of Northampton	Diploma HE Paramedic Science	FT
University of Plymouth	Supplementary Prescribing	PT
Queen Margaret University College, Edinburgh	Post Graduate Diploma Radiotherapy & Oncology	FT
	Masters in Radiotherapy & Oncology	FT
Sheffield Hallam University	Supplementary Prescribing	PT

Decision

The Panel is asked to –

accept the Visitors' report for the above named programmes, including the conditions recommended by the Visitors

or

accept the Visitors' report for the above named programmes, and vary the conditions recommended by the Visitors

Background information

None

Resource implications

None

Financial implications

None

Appendices

Visitors Reports (6)

Date of paper

1 June 2006

Health Professions Council

Visitors' Report

Name of education provider	Coventry University
Name and titles of programme(s)	Diploma of Higher Education in Operating Department Practice
Mode of Delivery (FT/PT)	FT
Date of event	19 th & 20 th April 2006
Proposed date of approval to commence	October 2006
Name of HPC visitors attending (including member type and professional area)	Alan Mount – HPC Visitor (ODP) Colin Keiley - HPC Visitor (ODP)
HPC Executive officer(s) (in attendance)	Abigail Creighton – HPC Executive officer (Education Manager)
Joint panel members in attendance (name and delegation):	Professor N Steele (Chair, Coventry University) Mrs H Mills (Assistant Registrar (Quality Enhancement), Coventry University) Mr J Tarrant (Programme Leader, Perioperative Practice, Institute of Health and Community Studies, Bournemouth University) Dr S Whatley (Head of Performing Arts Department, School of Art and Design, Coventry University)

Scope of visit (please tick)

New programme	<input type="checkbox"/>
Major change to existing programme	<input checked="" type="checkbox"/>
Visit initiated through Annual Monitoring	<input type="checkbox"/>

Confirmation of meetings held

	yes	no	n/a
Senior personnel of provider with responsibility for resources for the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Programme planning team	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Placements providers and educators	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Confirmation of facilities inspected

	yes	no
Library learning centre	<input checked="" type="checkbox"/>	<input type="checkbox"/>

IT facilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Specialist teaching accommodation	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Confirmation that particular requirements/specific instructions (if any) of the Education and Training Committee that have been explored e.g. specific aspects arising from annual monitoring reports.

Requirement (please insert detail)	yes	no	n/a
1.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Proposed student cohort intake number please state	25
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The following summarises the key outcomes of the approvals event and provides reasons for the decision.

CONDITIONS

CONDITION 1.

SET 2 Programme admissions

The admission procedures must:

2.1 give both the applicant and the education provider the information they require to make an informed choice about whether to make, or take up the offer of a place on a programme

Condition: The programme team are required to review and amend all documents with reference to the Association of Operating Department Practitioners (AODP) as the regulator of the ODP profession. This should include the reference to eligibility of registration which has been outlined and detailed on the information provided on the University Web –Site.

Reason: The information outlined within the programme documentation and the University Web – site gives detail and reference to the Association of Operating Department Practitioners as the regulator for ODPs. This information is misleading to both prospective candidates and students. The Health Professions Council is the regulator for the Operating Department Practice profession.

CONDITION 2.

2.2.2 criminal convictions checks;
2.2.3 compliance with any health requirements; and

Condition: The Faculty is required to review the current administration and practice for checking the CRB and Health status of prospective students prior to students commencing their programme of study. The current procedure undertaken by the University is for students to commence the programme and then during the student's induction week these checks are carried out.

Reason: Programme documentation states that students should have a satisfactory Health Screening by the Occupational Health Department and a Criminal Records Bureau Enhanced Disclosure check prior to commencing the programme. Failure to undertake and satisfactory meet these procedures would prevent student from undertaking clinical placements/practice and may lead to student appealing against the University on the grounds of discrimination.

CONDITION 3.

SET 3. Programme management and resource standards

- 3.2 The programme must be managed effectively.
- 3.4 There must be an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.
- 3.5 Subject areas must be taught by staff with relevant specialist expertise and knowledge.
- 3.10 A system of academic and pastoral student support must be in place.

Condition: The Faculty / Programme team are to provide evidence of the two new lecturers / programme team appointments. This evidence should include copies of the CV's, role profiles and information of the subjects and modules which the members of staff will be teaching/delivering on the DipHE Programme. Details of the intended clinical link areas and personal tutor workload should also be provided.

The programme team must also clearly articulate who lectures within each module of the programme, it is furthermore unclear who the nominated module leader is.

Reason: Currently there is only one full-time member of the programme team – (University Staff) who has responsibility for the delivery of ODP specific component of the DipHE programme. This member of the programme team is also providing academic and pastoral support to all students, in addition to teaching on the programme.

The programme team had provided CV's for lecturing staff, three identified staff in total. On examination and discussion during the visit it transpired that two members of the programme team had resigned from their post. This therefore raises the question of whether there is adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.

CONDITION 4.

- 3.6 A programme for staff development must be in place to ensure continuing professional and research development.

Condition: Faculty / Programme team to provide evidence of a staff development policy for the current programme staff (Team). Within the programme specification document there is a staff development statement for new lecturers. This statement is not reflective of the overall University staff development policy framework.

The programme team are also required to provide evidence of staff development regarding the issue of lack of clarity and insight of the ODP professions within the teaching team for the Interprofessional learning/education (IPL/E) pathway of the programme.

Reason: There is little evidence provided of clear staff development policy to support and guarantee continuing professional and research development across the programme.

CONDITION 5.

3.9 Where students participate as patients or clients in practical and clinical teaching, appropriate protocols must be used to obtain their consent.

Condition: The programme team need to provide a copy of a consent form to support this standard.

Reason: Within the SETs cross-referencing document it is stated that consent forms are used to gain students permission for these activities, no form or evidence was provided during the approval visit.

CONDITION 6.

SET 4. *Curriculum Standards*

4.1 The learning outcomes must ensure that those who successfully complete the programme meet the standards of proficiency for their part of the Register.

Condition: The location of the “standards of proficiency” needs to be explicit in the programme. The programme team must provide a matrix / mapping highlighting the programme and where the standards are taught i.e. which specific modules. The programme team therefore are required to review the mapping document provided for the approval visit.

Reason: The requirements of SET 4.1 are not clearly outlined in the modules. The evidence provided did not articulate all of the components, although the programme team were able to confirm that they were an integral part of the modules.

CONDITION 7.

SET 5. *Practice placements standards*

5.2 There must be an adequate number of appropriately qualified and experienced staff at the placement.

5.8 Unless other arrangements are agreed, practice placement educators:

- 5.8.1 have relevant qualification and experience;
- 5.8.2 are appropriately registered; and
- 5.8.3 undertake appropriate practice placement educator training.

Condition: The programme team must confirm that each of the practice placement areas has an adequate number of appropriately qualified and experienced staff to support students within their clinical placements. The team are therefore required to provide evidence of a mentor and verifier database which should contain details of registration, relevant qualification and experience of staff.

Reason: Although it was clear that practice placement areas had identified staff it was not clear whether there were adequate numbers, or that the roles were performed by

appropriately qualified and experienced staff. Identifying adequate numbers and qualifications would also facilitate gap analysis of vulnerable areas and identify specific role training schemes.

CONDITION 8.

SET 6. *Assessment standards*

6.7 Assessment regulations clearly specify requirements:

6.7.1 for student progression and achievement within the programme;

6.7.2 for awards which do not provide eligibility for inclusion onto the Register not to contain any reference to an HPC protected title in their title;

Condition: University / Faculty to provide evidence of the internal review of the regulations for Progression, Award and Fall Back Awards as outlined within section 12.5 of the programme specification document for the DipHE in ODP.

Reason: During the approval visit concerns were raised by member of the internal validation panel regarding the application of non consistent university regulations to the DipHE in ODP programme.

CONDITION 9.

6.7.5 for the appointment of at least one external examiner from the relevant part of the Register.

Condition: The programme team must appoint a new or an additional external examiner to support the DipHE programme.

Reason: The currently appointed external examiner to the programme is not registered on the relevant part of the HPC register (ODP). Therefore the programme fails to meet this standard currently.

Deadline for *Conditions* to be met: 30 June 2006

To be submitted to Approvals Panel on: 13 June 2006

RECOMMENDATIONS

SET 4. *Curriculum Standards*

4.7 Where there is inter-professional learning the profession specific skills and knowledge of each professional group are adequately addressed.

Recommendation: The programme team should continue with the work and development of the Interprofessional Learning/Education teaching team to gain an improved and clearer understanding of the role of the Operating department Practitioner (ODP) and the profession generally.

Reason: Through discussion with students regarding IPL/E modules there was an apparent lack of understanding of the role of the Operating department Practitioner (ODP) by members of the teaching team responsible for IPL/E delivery.

SET 5. *Practice placements standards*

5.1 Practice placements must be integral to the programme.

5.5 The number, duration and range of placements must be appropriate to the achievement of the learning outcomes.

5.6 The education provider must maintain a thorough and effective system for approving and monitoring all placements.

5.11 Practice placement providers must ensure necessary information is available at the appropriate time for both the education provider and students.

Recommendation: The programme team should consider using the Universities central clinical placement office for student's placements.

Reason: Currently the programme leader has a responsibility for the administration of all clinical placements for students on the DipHE in ODP programme. This work is in addition to her teaching and management role of the programme.

COMMENDATIONS

1. The HPC representatives were impressed at the high level of support that the programme received. This was evident throughout the visit by the commitment of the University staff.
2. The impending provision of the additional lecturing staff was seen as a positive move to create an effective system of development and support for both students and practice areas.
3. The additional support to the Programme Leader was confirmation that the University had recognised that the programme and its development was in the forefront of the University strategy plan.

The nature and quality of instruction and facilities meets the Standards of Education and Training.

We recommend to the Education and Training Committee of the HPC that they approve this programme (subject to any conditions being met).

Visitors' signatures:



Alan Mount

&

Colin Keiley

Date: 28th April 2006

**Health Professions Council
Department of Education and Policy**

Visitors report

Name of education provider	University of Huddersfield
Name and titles of programme(s)	Supplementary Prescribing for Allied Health Professionals
Date of event	Tuesday 4 th April 2006
Proposed date of approval to commence	September 2006
Name of HPC visitors attending (including member type and professional area)	Bob Fellows - Visitor and Paramedic David Halliwell – Visitor and Paramedic
HPC Executive officer(s) (in attendance)	Joanna Kemp– Education Officer
Joint panel members in attendance (name and delegation):	N/A

Scope of visit (*please tick*)

New programme	<input checked="" type="checkbox"/>
Major change to existing programme	<input type="checkbox"/>
Visit initiated through Annual Monitoring	<input type="checkbox"/>
This is a major change to an existing Supplementary prescribing course run for Nursing, Midwifery and health Visitors and Pharmacists, however this is a new programme for the HPC to include AHPs (Physiotherapists, Radiographers, Chiropodists, Optometrists and Podiatrists)	

Confirmation of meetings held

	yes	no	n/a
Senior personnel of provider with responsibility for resources for the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Programme planning team	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Placements providers and educators	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Confirmation of facilities inspected

	yes	no
Library learning centre	<input checked="" type="checkbox"/>	<input type="checkbox"/>
IT facilities, more specifically we had a demonstration of the BLACKBOARD SYSTEM	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Specialist teaching accommodation	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Confirmation that particular requirements/specific instructions (if any) of the Education and Training Committee that have been explored e.g. specific aspects arising from annual monitoring reports.

Requirement (please insert detail)	yes	no	n/a
1.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Proposed student cohort intake number please state	
Non – Medical Supplementary Prescribing (2 cohorts per Year) (approximately 40 students from Nursing, Pharmacy and AHP)	15 AHP per intake

CONDITIONS –Referenced to the HPC Standards of Education & Training (S.E.T.)

Condition 1:

SET 6.7.5 Assessment regulations must clearly specify requirements for the appointment of at least one external examiner from the relevant part of the Register.

Condition: The University must appoint an external examiner from the relevant part of the Register.

Reason: The HPC believes that the appointment of an external examiner from the relevant part of the register should be sought, as it was indicated during discussions that this process has been awaiting HPC accreditation prior to recruitment.

Condition 2:

SET 3.11 Throughout the documentation of the programme, the education provider must have identified where attendance is mandatory and must have appropriate monitoring systems in place.

Condition: The program documentation must clearly identify which parts of the course are statutory/ mandatory, especially within the student handbook and student documentation.

Rationale: From the Visitors reading of the documentation it was unclear which parts of the course were mandatory and how monitoring of attendance was to be undertaken. On meeting previous students the team discovered some had been unclear about attendance rules.

RECOMMENDATIONS – Referenced to the HPC Standards of Education & Training (S.E.T.)

Recommendation 1:

Set 3.6 A programme for staff development must be in place to ensure continuing professional and research development

Recommendation: The University should clarify within the documentation that there is a programme for staff development in place.

Rationale: It was apparent from speaking to staff that they felt supported and were undergoing continual development, although this was less evident within the documentation. CPD is deemed essential for staff teaching on such programmes.

Deadline for Conditions to be met: 30 May 2006

To be submitted to Committee on 13 June 2006 to note and for programme approval

COMMENDATIONS

The use of the Audit Tool to monitor and approve practise placements is a very good example of the teams desire to ensure practice placements are suitable for students to access.

The visitors would also like to commend the Team for their originality in setting up the two educationally led visits, which the visitors believe demonstrates the teams' commitment to ensuring that students are fit for practise and have a wide range of prescribing experience.

Decision of the HPC Visitors

The nature and quality of instruction and facilities meets the Standards of Education and Training.

We recommend to the Education and Training Committee of the HPC that they approve these programmes (subject to the 2 conditions being met).

Visitors' signatures:

B Fellows:

D Halliwell:

Date: April 2006

Health Professionals Council

Visitors' report

Name of education provider	The University of Northampton
Name and titles of programme(s)	Diploma of Higher Education in Paramedic Science
Date of event	4 th and 5 th April 2006
Proposed date of approval to commence	September 2006
Name of HPC visitors attending (including member type and professional area)	Marcus Bailey (Paramedic) Paul Bates (Paramedic)
HPC Executive officer(s) (in attendance)	Abigail Creighton (Education Manager)
Joint panel members in attendance (name and delegation):	Professor A Pilkington (Chair) Dr W Brakes (Internal Panel member - Director of Taught Programmes - <i>by correspondence</i>) Mrs S Bailey (Internal Panel member - Senior Lecturer, Northampton Business School) W Clowery (External Panel member - Clinical Support Officer, Dorset Ambulance Service) Paul Burke (External Panel member - Senior Lecturer –St George's Hospital Medical School) David Whitmore (Representative of the British Paramedic Association) Professor Malcolm Woollard (External Panel member - Visiting Professor, James Cook University Hospital, Middlesbrough)

Scope of visit (please tick)

New programme	<input checked="" type="checkbox"/>
Major change to existing programme	<input type="checkbox"/>
Visit initiated through Annual Monitoring	<input type="checkbox"/>

1.1 Confirmation of meetings held

	Yes	No	n/a
Senior personnel of provider with responsibility for resources for the programme	✓		
Programme planning team	✓		
Placements providers and educators	✓		

1.2 Confirmation of facilities inspected

	Yes	No
Library learning centre	✓	
IT facilities	✓	
Specialist teaching accommodation	✓	

1.3 Confirmation that particular requirements/specific instructions (if any) of the Education and Training Committee that have been explored e.g. specific aspects arising from annual monitoring reports.

This is a new programme that has not been previously approved by HPC

Requirement (please insert detail)	Yes	No	n/a
1.			✓

Proposed student cohort intake number please state	20
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The following summarises the key outcomes of the approvals event and provides reasons for the decision.

CONDITIONS

SET 2 Programme admissions

The admission procedures must:

2.1 give both the applicant and the education provider the information they require to make an informed choice about whether to make, or take up the offer of a place on a programme

Condition: The student handbook should be designed in such a way that enables prospective students to make an informed choice about the programme.

Reason: The current information does not inform the student to the nature and design of the programme including progression, achievement and the relationship with the partner ambulance trusts.

2.2 apply selection and entry criteria, including:

2.2.3 compliance with any health requirements; and

Condition: The HEI should have an agreed policy on health entry requirements.

Reason: The HEI currently has no requirements for health prior to commencement on the programme. However the partner ambulance trusts (1 of them) require a student to pass a fitness test prior to commencement on year 2 and 3 (including part time employment). It is feasible that a student may be discontinued at the end of year 1 for failing to meet the required fitness standard. This responsibility falls to the HEI to ensure fairness, equity and matching expectation with the sharing of information. The students need to be fully aware of this requirement and results of failing. If a fitness policy is adhered too then a clear failures and re-sit policy be detailed.

SET 3. Programme management and resource standards

3.4 There must be an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.

Condition: The HEI should provide evidence of active recruitment for paramedic lecturer to support programme.

Reason: The current arrangements were discussed with informal arrangements and recruitment planned. This needs to be actively formulated into a plan with evidence of recruitment. This is vital to ensure that adequate profession specific staffing exists to contextualise the shared learning, exam setting and student support.

3.9 Where students participate as patients or clients in practical and clinical teaching, appropriate protocols must be used to obtain their consent.

Condition: The HEI should have a consent form and protocol in place for the programme.

Reason: No form was shown on the visit although its design was mentioned.

3.11 Throughout the course of the programme, the education provider must have identified where attendance is mandatory and must have associated monitoring mechanisms in place.

Condition: The HEI should develop a robust attendance policy for entire programme (theory and practice).

Reason: While a placement log with hours recorded and signed exists, there seemed to be no such policy for theory sessions. As a range of subject areas and complex skills are taught there is a need for attendance levels to be set to ensure safe practice, with a mechanism to record and monitor. Students must be aware of this and also if they fail to achieve this level. Having no threshold (as at present) represents a potential issue over a student's ability to demonstrate the SOPs in terms of range and ability.

SET 4. Curriculum Standards

4.1 The learning outcomes must ensure that those who successfully complete the programme meet the standards of proficiency for their part of the Register.

Condition: The HEI should map the standards of proficiency (SOPs) against learning outcomes of each module. The HEI should ensure that all modules are achieved in order to demonstrate SOPs

Reason: With the HEI regulations it is possible for a student to fail a module but then for compensation to allow them to continue and complete the programme. This would fail to produce a student who meets the SOPs and therefore unable to register with the HPC. On the SOPs mapping it was unclear from the formatting of which modules would be met.

4.2 The programme must reflect the philosophy, values, skills and knowledge base as articulated in the curriculum guidance for the profession.

4.3 The curriculum must remain relevant to current practice.

Condition: The HEI should clearly differentiate between IHCD syllabus and currency of practice.

Reason: The programme team and partner trusts have used the IHCD framework for the course design. On reviewing the documentation there appears to be gaps in the

current practice of primary care and patient referral pathways. While it is acknowledged that the IHCD has given a base for development the course outcomes and module content needs to prepare students to demonstrate current healthcare provision. A key focus must be clinical decision making based around knowledge, skills and assessment. In order to achieve this, the programme must have this expanded range of practice to balance life threatening emergencies to encompass primary healthcare. This reflects current ambulance service demand and the values of “Taking Healthcare to Patients” document.

SET 5. *Practice placements standards*

5.2 There must be an adequate number of appropriately qualified and experienced staff at the placement.

5.8 Unless other arrangements are agreed, practice placement educators:

5.8.1 have relevant qualification and experience;

5.8.2 are appropriately registered; and

5.8.3 undertake appropriate practice placement educator training.

Condition: The HEI should have a mentor plan to ensure adequate placement education for student numbers.

Reason: There is an informal plan that means around 20 mentors are to be trained, but there are no clear standards for how they should be recruited and prepared.

5.5 The number, duration and range of placements must be appropriate to the achievement of the learning outcomes.

Condition: The HEI should have a placement plan that articulates learning outcomes and duration.

Reason: Placements are listed in the course documentation but no plan exists to show student progression through such areas. It is important to identify the key areas from the professional body guidance where students will achieve learning outcomes along with experience of patient care that supports current paramedic practice.

5.6 The education provider must maintain a thorough and effective system for approving and monitoring all placements.

Condition: The HEI should have a system for approving and monitoring all placements.

Reason: There was no current system in place to ensure consistency and quality of placements; this has been left to the partner ambulance trusts. However, it remains the responsibility of the HEI to ensure safety, consistency and student support.

5.7 Students and practice placement educators must be fully prepared for placement which will include information about and understanding of the following:

5.7.1 the learning outcomes to be achieved;

5.7.2 timings and the duration of any placement experience and associated records to be maintained;

5.7.3 expectations of professional conduct;

5.7.4 the assessment procedures including the implications of, and any action to be taken in the case of failure; and

5.7.5 communication and lines of responsibility.

5.10 The education provider must ensure necessary information is supplied to practice placement providers.

Condition: The HEI should produce definitive a mentor-hand book and student handbook.

Reason: Currently there is no such document that meets these standards of education and training (SETs). It was offered, in parts, as draft with much formatting and paramedic specific content needing to be added. This is vital for students to ensure their experience and achievement. For placement educators this is a key reference document to assist with their support, assessment and mentorship of students. All documents should be clear to read, understand and refer to as required.

SET 6. *Assessment standards*

6.1 The assessment design and procedures must assure that the student can demonstrate fitness to practise.

Condition: The HEI should revisit grading criteria.

Reason: Currently the grading criterion of D- allows a student to pass but require support. This means that they would not meet the SOPs or be able to enter the professional register. This must be reviewed to ensure adequacy of achievement with demonstrating the SOPs.

6.2 Assessment methods must be employed that measure the learning outcomes and skills that are required to practise safely and effectively.

Condition: The HEI should review and produce definitive skills booklet and policy for completion. The HEI should produce an assessment policy for the portfolio.

Reason: The current skills book was still in draft and there was no clear assessment policy for the portfolio of evidence. This must be designed to be clear for student achievement and progression.

6.5 There must be effective mechanisms in place to assure appropriate standards in the assessment.

Condition: The HEI should have an OSCE marking sheet.

Reason: The use of OSCEs was detailed but no marking framework was provided. This is required for the panel to view to ensure that the assessment process is robust to ensure fitness for purpose.

6.7 Assessment regulations clearly specify requirements:

6.7.1 for student progression and achievement within the programme;

Condition: The HEI should articulate exit and progression strategy for the award.

Reason: There was no statement within the course documentation. It is possible to leave the programme for many reasons. If this exit occurs at the end of year one then it is possible to exit the programme with academic credits along with practical skills. This needs to be added to the student handbook and course programme. It also allows for the notion of transition where people may need to step off the programme for external reasons.

6.7.5 for the appointment of at least one external examiner from the relevant part of the Register.

Condition: The HEI should appoint an external examiner from the Paramedic part of the register.

Reason: Currently no appointment has been made.

Deadline for Conditions to be met: 31 May 2006

To be submitted to Approvals Panel on: 13 June 2006

Recommendations:

There are no recommendations.

Commendations

The relationship and support between the HEI, partner ambulance trusts and SHA should be commended for the support and drive to establish paramedic education as an important need within the NHS for patient care.

The nature and quality of instruction and facilities meets the Standards of Education and Training.

We recommend to the Education and Training Committee of the HPC that they approve this programme (subject to any conditions being met).

Visitors' signatures:

Marcus Bailey

Paul Bates

Date: 12th April 2006

Health Professions Council Department of Education

Visitors' report

Name of education provider	University of Plymouth
Name and titles of programme(s)	Supplementary Prescribing
Date of event	9 th February 2006
Proposed date of approval to commence	AHP Intake September 2006
Name of HPC visitors attending (including member type and professional area)	Marcus Bailey (Paramedic) Bob Dobson (Paramedic)
HPC Executive officer(s) (in attendance)	Jo Kemp Karen Scott
Joint panel members in attendance (name and delegation):	Will Diver Principal Lecturer in Geology, Faculty of Science (Chair) Ruth Clemow FHSW Quality Manager/Associate Dean, Learning & Teaching Nominee Mel Joyner Associate Dean (Learning & Teaching), Faculty of Social Science & Business Gordon Deakin Acting Principal Lecturer in Psychological Interventions Mrs Judith Forward Senior Lecturer, University of West of England Bristol, External Advisor

Scope of visit (please tick)

New programme	<input checked="" type="checkbox"/>
Major change to existing programme	<input type="checkbox"/>
Visit initiated through Annual Monitoring	<input type="checkbox"/>

1.1 Confirmation of meetings held

	yes	no	n/a
Senior personnel of provider with responsibility for resources for the programme	X		
Programme planning team	X		
Placements providers and educators: <i>yes but no designated medical practitioners</i>	X		

1.2 Confirmation of facilities inspected

	yes	no
Library learning centre	X	
IT facilities	X	
Specialist teaching accommodation	X	

1.3 Confirmation that particular requirements/specific instructions (if any) of the Education and Training Committee that have been explored e.g. specific aspects arising from annual monitoring reports.

1.4

This is a new programme that has not been previously approved by HPC

Proposed student cohort intake number please state	60 twice a year
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The following summarises the key outcomes of the approvals event and provides reasons for the decision.

CONDITIONS

SET 2.1 give both the applicant and the education provider the information they require to make an informed choice about whether to make, or take up the offer of a place on a programme.

Condition 1: The programme paperwork must include all relevant information that allows potential students to make an informed choice of the programme. The documentation must be accurate in relation to terminology and referencing the HPC appropriately.

Reason: Documentation is incomplete with regards to unit numbers and inaccuracies related to the HPC terminology as a professional body. The documents need to be reviewed in order to ensure consistency of information.

SET 2.2.2 criminal convictions checks;

Condition 2: The University must ensure students entering the programme have had a criminal conviction check.

Reason: There is currently no criminal conviction check carried out by the University. This is vital as the programme could accept NHS, private and independent practitioners. This acts as a safe guard for those who may not have completed a CRB check.

SET 3.9 Where students participate as patients or clients in practical and clinical teaching, appropriate protocols must be used to obtain their consent.

Condition 3: The University must have a process for obtaining student consent for participation in scenario or role play teaching. The students must be aware of this prior to commencing the course.

Reason: The course team stated that role play and scenario work is undertaken although no process for collection of consent was seen. The students were also not informed of this prior to commencing the course.

SET 3.11 Throughout the course of the programme, the education provider must have identified where attendance is mandatory and must have associated monitoring mechanisms in place.

Condition 4: The programme must have a defined compulsory attendance level set. There must be a process for monitoring. There must be a mechanism in place to ensure attendance below the set level is made up prior to the programme being completed.

Reason: The programme team verbally expressed the importance of all sessions taught on the programme. However at this stage they have no set attendance level. The content is vital for public protection and the course team needs to set a minimum level based around student achievement and public safety. This should be clearly described in any course or student handbook to ensure students are aware of the importance of attendance.

SET 5.7.1 the learning outcomes to be achieved;

SET 5.7.2 timings and the duration of any placement experience and associated records to be maintained;

SET 5.7.3 expectations of professional conduct;

SET 5.7.4 the assessment procedures including the implications of, and any action to be taken in the case of failure; and

SET 5.7.5 communication and lines of responsibility.

Condition 5: The University must have a system in place to ensure practice placement educators (in this case Designated Medical Practitioners) are fully prepared to accept students on this programme. The DMP should also have a clear channel of communication to the University to ensure any issues arising are dealt with in a timely and appropriate manner.

Reason: Students described some instances of the DMP not being aware of their role, the course outcomes and assessment procedure. These elements are vitally important to ensure student achievement, consistency of experience and validity of the assessment process. Although the DMP receive a handbook it is difficult to measure whether the information has been read and questions raised prior to students commencing in the placement area.

SET 5.13 The placement providers must have an equal opportunities and anti-discriminatory policy in relation to candidates and students, together with an indication of how this will be implemented and monitored.

Condition 6: The University must ensure that placement areas have an equal opportunity and anti-discriminatory policy that the students will adhere to.

Reason: In the documentation the course team made reference to the Universities policies but did not specifically relate these to the practice settings. Not all placements will be within the NHS.

SET 6.7.5 for the appointment of at least one external examiner from the relevant part of the Register.

Condition 7: At least one external examiner from the HPC register who is qualified Supplementary Prescribe must be appointed prior to the course commencing.

Reason: No external examiner from the HPC has been appointed. Only one needs to be appointed from the professional groups who may supplementary prescribe.

**Deadline for *Conditions* to be met: 28 March 2006
To be submitted to Approvals Committee on: 13 June 2006**

RECOMMENDATIONS

SET 3.4 There must be an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.

Recommendation: The school should continue with its recruitment of AHPs to the Supplementary Prescribing teaching team.

Reason: The course team have developed a summer school with some uptake of places from AHPs on Supplementary Prescribing. This should be developed to ensure that all AHPs who can Supplementary Prescribe have professionals who can teach and offer professional advice on programme content.

SET 5.8.3 undertake appropriate practice placement educator training.

Recommendation: It is recommended that the course team develop a practice placement educator training plan for Amp's.

Reason: This is to develop the placements and participation of DMPs in the delivery of practice experience. Face to face contact would ensure communication of requirements and expectations from all parties.

Commendations

1. The University should be commended for the quality assurance mechanisms that exist that give a robust platform for continual improvement and monitoring.
2. The support and engagement of external reference points to support the course team should be commended. This is evident in the programme design.
3. The support for the programme from the university is evident. This combined with the openness of the course team to listen and action feedback should ensure a programme that remains fit for purpose.

The nature and quality of instruction and facilities meets the Standards of Education and Training.

We recommend to the Education and Training Committee of the HPC that they approve this programme (subject to any conditions being met).

Visitors' signatures:

Marcus Bailey:

Bob Dobson:

Date: February 2006

Health Professions Council

Visitors' report

Name of education provider	Queen Margaret University College, Edinburgh
Name and titles of programme(s)	Post Graduate Diploma Radiotherapy & Oncology MSc in Radiotherapy & Oncology
Mode of Delivery (FT/PT)	Full Time
Date of Visit	12 th and 13 th April 2006
Proposed date of approval to commence	September 2006
Name of HPC visitors attending (including member type and professional area)	Russell Hart Martin Benwell
HPC Executive officer(s) (in attendance)	Nicole Borg
Joint panel members in attendance (name and delegation):	

Scope of visit (please tick)

New programme	<input checked="" type="checkbox"/> MSc
Major change to existing programme	<input checked="" type="checkbox"/> Pg Dip
Visit initiated through Annual Monitoring	<input type="checkbox"/>

1.1 Confirmation of meetings held

	yes	no	n/a
Senior personnel of provider with responsibility for resources for the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Programme team	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Placements providers and educators	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Students (current or past as appropriate)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

1.2 Confirmation of facilities inspected

	yes	no	n/a
Library learning centre	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IT facilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Specialist teaching accommodation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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1.3 Confirmation that particular requirements/specific instructions (if any) of the Education and Training Committee that have been explored e.g. specific aspects arising from annual monitoring reports.

Requirement (please insert detail)	yes	no	n/a
1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Proposed student cohort intake number please state	12 every second year
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The following summarises the key outcomes of the Approvals event and provides reasons for the decision.

CONDITIONS

SET 6. *Assessment standards*

6.7 Assessment regulations clearly specify requirements:

6.7.2 for awards which do not provide eligibility for inclusion onto the Register not to contain any reference to an HPC protected title in their title;

Condition: Clearly state in the programme documentation the degree awarded to students who achieve 120 credit points at SCQF level 11 but fail clinical modules.

Reason: Students with 120 points would be eligible for the award of a Postgraduate Diploma. If a student failed a clinical module they could still accrue over 120 points to be awarded the PG Dip, however they would not be eligible for HPC registration.- therefore a separate named award must be included in the programme documentation for those students who can be awarded a PG Dip that does not entitle them to HPC registration.

Deadline for Conditions to be met: 30 June 2006

To be submitted to Approvals Panel/Committee on: 13 June 2006

RECOMMENDATIONS

SET 4. *Curriculum Standards*

4.7 Where there is inter-professional learning the profession specific skills and knowledge of each professional group are adequately addressed.

Recommendation: HPC supports and encourages the development of IPE in the programme.

Reason: IPE is being included in the undergraduate pre registration radiotherapy programme and the HPC would encourage the development of IPE in the postgraduate pre-registration programme to promote equity of experience.

The nature and quality of instruction and facilities meets the Standards of Education and Training.

We recommend to the Education and Training Committee of the HPC that they approve this programme (subject to any conditions being met).

Visitors' signatures:

Russell Hart
Martin Benwell

Date:

**Health Professions Council
Department of Education**

Visitors' report

Education provider	Sheffield Hallam University
Name and titles of programme	Non Medical Prescribing Programme
Date of event	Thursday 6 th April 2006
Proposed date of approval to commence	September 2006
Name of HPC visitors attending (including member type and professional area)	Vince Clarke – Paramedic Bob Fellows - Paramedic
HPC Executive officer	Jo Kemp – Education Officer
Joint panel members in attendance	Roger New - Chair Jenny Shelton (am) - Head of Quality & Enhancement Val Keating (pm) – Quality & Enhancement Eleanor Willcocks - Secretary

Scope of visit (please tick)

New programme	<input checked="" type="checkbox"/>
Major change to existing programme	<input type="checkbox"/>
Visit initiated through Annual Monitoring	<input type="checkbox"/>
This is a major change to an existing Supplementary prescribing course run for Nursing, Midwifery and health Visitors and Pharmacists, however this is a new programme for the HPC to include AHPs (Physiotherapists, Radiographers, Chiropodists and Podiatrists)	

Confirmation of meetings held

	yes	no	n/a
Senior personnel of provider with responsibility for resources for the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Programme planning team	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Placements providers and educators	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Confirmation of facilities inspected

	yes	no
Library learning centre	<input type="checkbox"/>	<input checked="" type="checkbox"/>
IT facilities, more specifically we had a demonstration of the Blackboard	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Clinical Practice areas	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Confirmation that particular requirements/specific instructions (if any) of the Education and Training Committee that have been explored e.g. specific aspects arising from annual monitoring reports.

Requirement (please insert detail)	yes	no	n/a
1.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Proposed student cohort intake number please state Non – Medical Supplementary Prescribing (2 cohorts per Year)	40 per intake
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The following summarises the key outcomes of the approvals event and provides reasons for the decision.

CONDITIONS

Condition 1:

SET 2.2.2 and 2.2.3. Apply selection and entry criteria, including criminal convictions checks and compliance with health requirements.

Condition: Within the documentation, Sheffield Hallam University must ensure that all AHP students have a current Criminal Records Bureau (CRB) conviction checks and comply with the health check requirements.

Reason: It was stated by the University programme team that selection and entry requirements as listed in approval/validation documentation would be rigorously applied. However it was also recognised by the admissions team that students although predominately drawn from the NHS, due to SHA funding, are not exclusively so and that students could be self funded and potentially come from AHPs in private practice. Therefore the criminal conviction checks and health checks cannot remain solely the responsibility of an employer.

Condition 2:

SET 3.9 Where students participate as patients or clients in practical and clinical teaching, appropriate protocols must be used to obtain their consent.

Condition: Sheffield Hallam University must articulate within the documentation how consent is obtained by students participating as patients or clients in practical or clinical teaching.

Reason: From the reading of the documentation and discussion with the past students and programme development team that consent was not sufficiently clear. It is essential that students fully understand that they have the choice to act as a client / patient in role play, practical and clinical environments. That consent is required by the University in advance of the role play and can be withdrawn by the student at a later date, should they change their mind.

Condition 3:

SET 5.6 The education provider must maintain a thorough and effective system for approving and monitoring all placements.

Condition: Sheffield Hallam University must document how they will maintain thorough and effective systems for approving and monitoring all clinical practice placements.

Reason: From the reading of the documentation and discussion with the past students and the programme development team it was not sufficiently clear to the visitors that this occurred.

Condition 4:

SET 5.7 (5.7.2 and 5.7.5) Students and practice educators must be fully prepared for placement which will include information about and understanding of the following:

- **5.7.2 timings and the duration of any placement experience and associated records to be maintained.**
- **5.7.5 communication and lines of responsibility.**

Condition: The HPC visitors require a hard copy of the student handbook that satisfactorily addresses the two SET elements under 5.7 (i.e. 5.7.2 and 5.7.5).

Reason: From the reading of the documentation and discussion with the past students and program development team, these elements were not sufficiently clear.

Deadline for Conditions to be met: 30 May 2006

To be submitted to Approvals Committee on: 13 June 2006

RECOMMENDATIONS

Recommendation 1:

SET 3.6 A programme for staff development must be in place to ensure continuing professional and research development.

Recommendation: The HPC visitors recommend that Sheffield Hallam University articulate more clearly in the documentation how the CPD, research and staff development is managed.

Reason: From the reading of the documentation and discussion with the practice development team this was not sufficiently clear.

Recommendation 2:

SET 3.11 Throughout the course of the program, the education provider must have identified where attendance is mandatory and must have associated monitoring mechanisms in place.

Recommendation: Sheffield Hallam University should make it clear within the documentation the minimum hours that are required in clinical practice.

Reason: It was not clear to the HPC visitors in reading the documentation. There were inconsistencies in the paperwork ascertaining to the duration of clinical practice.

Decision of the HPC Visitors

The nature and quality of instruction and facilities meets the Standards of Education and Training.

We recommend to the Education and Training Committee of the HPC that they approve these programmes (subject to the 4 conditions being met).

Visitors' signatures:

Vince Clarke:

Bob Fellows:

Date: April 2006